



APPLICATION FOR RESIDENTIAL ELECTRIC PERMIT

STARK COUNTY BUILDING DEPT.

3951 Convenience Cir NW Ste 110

Canton, OH 44718

330-451-1770 / FAX: 330-491-8373

www.starkcountyohio.gov

PERMIT # _____

ZONING # _____

SEPTIC/SEWER _____

DATE _____

TOWNSHIP _____

LOCATION ADDRESS: _____

(PLEASE INCLUDE ADDRESS DIRECTION. N, S, E, W, ETC.) CITY, ZIP

PROJECT NAME: _____ # of Units _____

POWER COMPANY _____ AMPS _____ TOTAL SQUARE FOOT _____

CONTRACTOR _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ CELL PHONE _____

EMAIL ADDRESS(PLEASE PROVIDE) _____ PHONE _____

STARK CO REGISTRATION #: _____

EQUIPMENT INSTALLED:

___ New Construction

___ SERVICE/CHANGE

___ Additional meters

___ Swimming Pool

___ Outlets, switches, lights

___ Temp Service

___ Generator

___ Above Ground

___ Air Conditioning – New

___ In Ground

Other _____

PROPERTY OWNER _____

ADDRESS _____

CITY _____ STATE _____ ZIP _____ PHONE _____

TENANT NAME _____ TENANT PHONE _____

PERMIT FEES & INSPECTIONS:

PERMIT FEE - \$50 minimum per unit \$ _____

CHECK _____ + \$2.00 per 100 SQ. FT. x _____ sq. ft. \$ _____

CASH _____ Temporary Service - \$50.00 \$ _____

SPECIAL ONE TIME INSPECTION - \$50 per unit \$ _____

NO FINAL INSPECTION WILL BE GIVEN UNTIL ALL FEES HAVE BEEN PAID

SUBTOTAL \$ _____

1% BBS \$ _____

Signature _____

TOTAL \$ _____

Applicant, Agent, Owner

The applicant, agent, owner of this building and the undersigned is/does (1) agree to conform to applicable laws of the Stark County Building Dept. and State of Ohio, (2) responsible to verify that the job location is in the jurisdiction of the Stark County Building Dept. and if the job location is out of the jurisdiction, **NO** refund will be issued, (3) the address is correct, (4) **responsible for making arrangements for all inspections**,
CALL BEFORE YOU DIG - OUPS 1-800-362-2764.

PLEASE PROVIDE EMAIL FOR BETTER SERVICE